

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154639

FILED  
Jul 21, 2008  
Secretary of State

Entity Name: QUINTESSENCE OF HOME APPLIANCES, INC.

## Current Principal Place of Business:

3520 AGRICULTURAL CENTER DRIVE SUITE 304  
AND 305  
ST. AUGUSTINE, FL 32092

## New Principal Place of Business:

## Current Mailing Address:

3520 AGRICULTURAL CENTER DRIVE SUITE 304  
AND 305  
ST. AUGUSTINE, FL 32092

## New Mailing Address:

FEI Number: 02-0760030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAJALIA, NICK P  
3520 AGRICULTURAL CENTER DRIVE SUITE 304  
AND 305  
ST. AUGUSTINE, FL 32092 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	BAJALIA, GINA	
Address:	3520 AGRICULTURAL CENTER DR. STE. 304	
City-St-Zip:	ST. AUGUSTINE, FL 32092	
Title:	VP	( ) Delete
Name:	BAJALIA, PETER	
Address:	3520 AGRICULTURAL CENTER DRIVE STE 304	
City-St-Zip:	ST. AUGUSTINE, FL 32092	
Title:	D	( ) Delete
Name:	BAJALIA, GINA	
Address:	3520 AGRICULTURAL CENTER DRIVE STE 304	
City-St-Zip:	ST. AUGUSTINE, FL 32092	

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICK BAJALIA

OD

07/21/2008

Electronic Signature of Signing Officer or Director

Date